



ACTIVITIES WEEK – ‘P’ PLATE DEFENSIVE DRIVING COURSE

The school is offering a Senior Defensive Driving Course at the Driver Education Centres of Australia (DECA) facility in Shepparton, Victoria.

The objectives of the program are to increase the participants' awareness of the principles of Defensive Driving to minimise the risk of involvement in a motor vehicle accident. The course focuses on the skills, knowledge and attitude required for defensive driving, and to increase awareness of vehicle technology (ABS, ESC, EBS systems).

Theory sessions will be conducted on an 8:1 student to trainer ratio and practical drive session on a 4:1 student to trainer ratio.

Mr Lance will be travelling with the students. The students will be in his care throughout the trip.

1. ITINERARY

Monday 10 December 2012

7:30 – Bus leaves TRAC

9:30 – Toilet stop and morning tea (10 min.) Wangaratta McDonalds/Truck stop

11:30 – Lunch at McDonalds, Shepparton

12:15 - Arrive at DECA

12.30pm - 4.30pm at DECA

Practical in vehicle training on the skidpan covering the following areas:

- ABS braking
- Evasive braking maneuvers
- Steering techniques using radius curves
- Braking and cornering lines on the highway circuit

6:30 – 9:30 - Evening meal and entertainment at the Star Bowl ten pin bowling.

Tuesday 11 December 2012

7:00 – 8:00 - Have breakfast and pack up student belongings.

8:15 – Leave caravan park for DECA

8.30am - 4.30pm at DECA

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All day practical drive session covering country road driving with focus on:

- Observation and planning
- Forward planning
- Cornering lines
- Defensive Driving

4:45 – Leave DECA for home.

6:15 – Stop for evening Meal at Wangaratta McDonalds/Truck stop

9:00 – Arrive at TRAC

Note: If the arrival time at TRAC looks like being different, students can ring their parents from Albury to advise them of the new ETA.

Risk: This excursion may involve students participating in activities of a hazardous nature, though school staff will take reasonable care to minimise risks to participants.

Parents are asked to call the organising teacher to discuss the risks if they have any concerns or questions.

2. EQUIPMENT AND CLOTHING

Each person should have a towel, soap and toilet articles, pyjamas, warm clothing. Students should wear comfortable cloths and **must wear enclosed footwear whilst on course and driving.**

3. COOPERATION

The course is to be delivered by trained professionals employed by DECA. Students will follow the instructions of the instructors and behave in an appropriate manner at all times.

4. RULES AND BEHAVIOURAL REQUIREMENTS

No excessive or unreasonable demands will be placed upon any student. Rules and behavioural requirements exist for the smooth operation of this activity for the safety and enjoyment of all. However, **any student who displays gross misconduct will be sent back to school immediately. Parents will be contacted with pickup to happen as soon as physically possible.** It is not anticipated that such action will be necessary. Smoking or drinking of alcohol will not be tolerated.

Your behaviour generally should be such that it brings credit to yourself, your family and your school.

For the duration of this activity, students will be deemed to be under the school's jurisdiction and responsibility and therefore subject to its rules.

Under no circumstances will alcohol be permitted to be consumed nor any drug not authorised by a medical practitioner be administered. Persons on prescribed medication will indicate on the medical form.

5. ACCOMMODATION

Our accommodation will be at:

Goulburn Valley Motor Village
8049 Goulburn Valley Highway
Shepparton South
Victoria 3631
PH. 03 58231561

6. DECA CONTACT DETAILS

145 Wanganui Road,
Shepparton, Victoria,
(03) 5832 9108

7. PERSONAL BELONGING

Each student is responsible for their own personal belongings. No item of substantial value should be taken away. **Students are asked to pack their belongings as compactly as possible.**

8. SPENDING MONEY

On Monday students and staff will go to the local 10 pin bowling centre for bowling and a meal. The cost of this package is \$25 for 2 games and a meal or \$15 for one or the other. Students will need to bring some money for lunch whilst out on their practical drive day. This is usually at a bakery or cafe, as well as for lunch and an evening meal whilst on the bus. This will most likely at McDonalds or the roadhouse at Wangaratta.

9. COST

\$410 -this will cover accommodation, bus travel, DECA course cost and breakfast on Tuesday.

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MEDICAL INFORMATION

1. STUDENT'S FULL NAME _____

Relevant medical information for each student will be available for staff from the school's database should the need arise.

2. IS YOUR CHILD CURRENTLY ON A SPECIAL DIET Yes / No

If "Yes", give details _____

3. IMPORTANT - In the event of known recent illnesses -

(a) Is your child taking/do they take any medication prescribed by a medical practitioner? Yes / No

(b) Does he/she possess a medical statement giving instructions for treatment? Yes / No

If "Yes" give details _____

IMPORTANT MEDICAL INFORMATION

(a) Any child participating in this trip with a medical problem should bring a letter from his/her doctor regarding treatment of the condition.

(b) Medication brought on the trip should have the child's name, dosage and dosage times clearly marked. Only medication in the child's name will be administered by a staff member.

PAYMENT SLIP

To confirm my child's place on the excursion I have enclosed the following items:

Payment of \$410 for _____
(Child's name)

Parent/Student Undertaking enclosed

My child does/does not (please circle) have a mobile phone.

Their mobile phone number is: _____

Signature _____

Date ____/____/____

PLEASE SEND THIS PAGE TO THE OFFICE WITH PAYMENT

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PARENTAL UNDERTAKING

The Principal,
The Riverina Anglican College
WAGGA WAGGA NSW 2650

Dear Sir

1. I agree to my child/ward attending the Activities Week Trip between 10 and 11 December 2012.
2. I agree to indemnify The Riverina Anglican College and its officers and servants for any accident or illness, which may befall or occur to them during their participation in any activity or function connected with this Activities Week Trip.
3. In the event of any accident or illness, I authorise the obtaining of, on my behalf, such medical assistance as my child may require. I also undertake to pay medical fees and/ or cost of drugs, which may be incurred while my child is participating in this Activities Week Trip
4. I agree to equip my child with any medication they may need for the excursion. I understand that teachers will store and administer this whilst on the excursion.

Signature _____
(Parent/Guardian)

Date ____/____/____

STUDENT UNDERTAKING

Dear Sir,

1. I request permission to attend the Activities Week Trip between 10 and 11 December 2012.
2. I understand that for the duration of this trip, I will be deemed to be under the School's jurisdiction and its rules.
3. Under no circumstances will I consume any form of alcohol, nor will I administer or consume any drug not authorised by a registered medical practitioner.
4. I will extend every courtesy and consideration to the School's teachers, the public, and to fellow students.
5. I will carefully and fully obey all instructions issued by the School's teachers.

Student's Signature _____

Date ____/____/____

PLEASE SEND THIS PAGE TO THE OFFICE WITH PAYMENT

I hereby give permission for my childof Year to attend The **'P' PLATE DEFENSIVE DRIVING COURSE.**

Risk: I understand that this excursion may involve my son/daughter participating in activities of a hazardous nature, though school staff will take reasonable care to minimise risks to participants.

I have enclosed \$410.

Please note that payments through the school website or direct to the College Bank account cannot be accepted for Activities Week payments.

If your child does not have their 'P' plates yet, and they do not achieve them by the activity date a full refund will be given.

Cash

Cheque

Credit card authority

Signed:.....

Credit Card Payments			
Card Type:	Visa <input type="checkbox"/>	Amex <input type="checkbox"/>	Mastercard <input type="checkbox"/>
Card Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Expiry Date	<input type="text"/>	<input type="text"/>	Amount <input type="text"/>
Cardholder's Name	_____		
Cardholder's Signature	_____		

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